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<b>TO:</b>	Examiner Blair M. Johnson	<b>COMPANY:</b>	Commissioner for Patents - Art Unit 3634
<b>FAX:</b>	703-872-9306	<b>PAGES:</b>	31 (including cover)
<b>PHONE:</b>		<b>DATE:</b>	June 1, 2005
<b>RE:</b>	U.S. Application Serial No. 10/823,235	<b>ATTORNEY DOCKET/REF. NO.</b>	A202 1441.2
		<b>ACCOUNTING NO.</b>	28502.0217.9

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In re Application of: Pytkki et al

**OFFICIAL**

Serial No.: 10/823,235

Filed: 04/13/2004

For: REDUCED VISIBILITY INSECT SCREEN

Attached in connection with the above-identified patent application are:

- (1) Transmittal Form;
- (2) Supplemental Information Disclosure Statement;
- (3) PTO/SB/08B;
- (4) Two citations; and
- (5) Fee Transmittal.

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ATLANTA 452038v1

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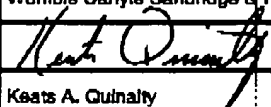
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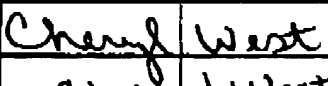
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<b>TRANSMITTAL FORM</b>	Application Number	10/823,235
	Filing Date	04/13/2004
	First Named Inventor	Russell J. Pytko
	Art Unit	3634
	Examiner Name	Johnson, Blair M.
(to be used for all correspondence after initial filing)		
Total Number of Pages in This Submission	30	Attorney Docket Number A202 1441.2

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): PTO/SB/08B Two citations
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Womble Carlyle Sandridge & Rice, PLLC		
Signature			
Printed name	Keats A. Guinilty		
Date	6/1/05	Reg. No.	46,426

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.		
Signature		
Typed or printed name	Cheryl West	Date June 1, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 39 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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PTO/SB/17 (12-04v2)

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Effective on 12/08/2004.  
Fees pursuant to the Consolidated Appropriations Act 2005 (H.R. 4810).**FEE TRANSMITTAL**  
For FY 2005☐ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 180.00

## Complete If Known

Application Number	10/823,235
Filing Date	04/13/2004
First Named Inventor	Russell J. Pytki
Examiner Name	Johnson, Blair M.
Art Unit	3634
Attorney Docket No.	A202 1441.2

## METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_

☒ Deposit Account Deposit Account Number: 09-0528 Deposit Account Name: Womble Carlyle Sandridge & Rice, PLLC

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

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## FEE CALCULATION

## 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

## 2. EXCESS CLAIM FEES

## For Dependents

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

Multiple dependent claims

Total Claims	Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
5 - 20 or HP	0	x				
HP = highest number of total claims paid for, if greater than 20.						
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)			
5 - 3 or HP	0	x				
HP = highest number of independent claims paid for, if greater than 3.						

## 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100	/ 50	(round up to a whole number) x		

## 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Information Disclosure Statement

Fees Paid (\$)

\$180.00

## SUBMITTED BY

Signature	<i>Keith A. Quinault</i>	Registration No. (Attorney/Agent)	48,426	Telephone	404-879-2423
Name (Print/Type)	Keats A. Quinault	Date	6/1/05		

This collection of information is required by 37 CFR 1.139. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1460, Alexandria, VA 22313-1460.

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**PATENTS**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

In re application of:	)	
	)	
Russell J. Pytkki	)	Art Unit: 3634
	)	
Serial No.: 10/823,235	)	Examiner: Johnson, Blair M.
	)	
Filed: April 13, 2004	)	
	)	
For: REDUCED VISIBILITY INSECT SCREEN	)	

**SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

The citation of information on the attached Form PTO/SB/08B, "Information Disclosure Statement By Applicant" is made pursuant to 37 C.F.R. §§ 1.97 and 1.98. Pursuant to 37 C.F.R. §1.97(b)(3), a copy of each cited item is enclosed unless stated otherwise hereinbelow.

The Examiner is specifically requested not to rely solely on the information submitted herein. On the contrary, the Examiner is requested to conduct an independent and thorough review of the information, and to form independent opinions as to their significance.

It is respectfully requested that the Examiner initial and return copies of the enclosed Form PTO/SB/08B and to indicate in the official file wrapper of the above-identified patent application that each item of the cited information has been considered.

The citation of this information does not constitute an admission that any of the materials are available as a reference or of priority, or a waiver of any right applicant may have under applicable statutes, Rules of Practice in patent cases, or otherwise.

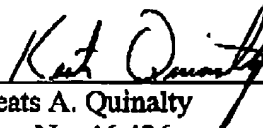
- 1 -

ATLANTA 452037v1

The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to deposit account no. 09-0528.

Date: \_\_\_\_\_

6/1/05

  
\_\_\_\_\_  
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Docket No.: A202.1441.2



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